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DECLARATION AND POWER OF ATTORNEY		Attorney Dock	et Number	4002	2-3398/PC8	00.00
FOR PATENT API	First Named In	First Named Inventor Fred J. Molz, IV				
	☐ Declaration		COMPLETE IF KNOWN			
			Application No.			
Declaration submitted with Initial Filing	Submitted after Initial Filing	Filing Date	Filing Date			
	(surcharge (37 CFF 1.16(e)) required)		Group Art Unit			
		Examiner's Na	me .			
PCT International App And was amended on I hereby state that I have revincluding the claims, as amended I acknowledge the duty to discontinuous process.	t and sole inventor re listed below) of the deck one) R INSERTING ANd ck one) lication No	o are as stated below (if only one name is the subject matter what ID ENGAGING VEF as United States Ap stand the contents tent referred to above	s listed belonich is clair TEBRAL I plication N (if a of the above.	ow) or med ar MPLAI	an original, firnd for which a NTS IN MINIM Die).	natent
accordance with Title 37, Code I hereby claim foreign priority ben- application(s) for patent or inventor' east one country other than the checking the box, any foreign appli- application on which priority is claim	efits under Title 35 s certificate, or 365 United States of ication for patent oned:	5, United States Coo 5(a) of any PCT inter America, listed belo	rnational apow and ha	pplicati ave als	on which design identified be	gnated a
Prior Foreign Application Number(s	·	Foreign Filing Date (MM/DD/YY)	Priority N Claimed		Certified Copy	
	Journa y		Viaillieu		Yes	No
I hereby claim the benefit under 35 U.S.C. 119(e)	of any United States provi	sional application(s) listed be	low.			
Application Number(s) Filing Da	ate (MM/DD/YYYY)	☐ Additional pro supplemental prior			umbers are listed 3/02B attached he	

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application: U.S. Parent Application or PCT Parent Parent Patent Parent Filing Date Number (MM/DD/YYYY)** Number (if applicable) Additional US or PCT International application numbers are listed on a supplement priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Place Customer Customer Number Number Bar Code OR Label Here X Registered practioner(s) name/registration number listed below. Name **Registration Number** Name **Registration Number** Douglas A. Collier 43,556 Additional registered practioner(s) named on supplemental Registered Practioner Information sheet PTO/SB/02C attached Х Direct all correspondence to: Customer Number OR Correspondence address below Bar Code Label Name Douglas A. Collier Firm Name WOODARD EMHARDT NAUGHTON MORIARTY & McNETT Address 111 Monument Circle, Bank One Tower, Suite 3700 Address City Indianapolis State IN ZIP 46204 Country USA Telephone 317/634-3456 Fax 317-637-7561 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Full name of sole or first inventor: Given Name (first **Family Name** Fred J. Molz, IV and middle, if any) or Surname Date of 11/14/03 Signature: inventor's Signature: Residence: Collierville, Tennessee USA City, State, Country) **USA** Citizenship: Post Office

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